## PART B - FEE(S) TRANSMITTAL

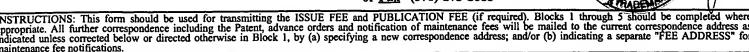
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09629 75	590 06/13/2006		tificate of Mailing or Trans	emission		
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APPLICATION NO.	CATION NO. FILING DATE FIRST			INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/676,252	10/02/2003 Kwang Min 1			lin Kim	054358-5018	3449 .
TITLE OF INVENTION: LIQUID CRYSTAL DISPLAY DEVICE						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	09/13/2006
EXAMINER ART		ART UN	пт	CLASS-SUBCLASS	]	
CHUNG, DAVID Y		2871		349-123000	•	
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has 626550 recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment f(:1501 1408.00 Dc.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STAFE 102150 UNTRY) 309.09 DA  12.09 DA  LG.Philips LCD Co., Ltd.  Seoul, Korea						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💥 Corporation or other private group entity 🚨 Government						
4a. The following fee(s) are enclosed:  KIssue Fee  KPublication Fee (No small entity discount permitted)  KAdvance Order - # of Copies 4			b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number50-03 10 (enclose an extra copy of this form).			
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Authorized Signature			Date August 25, 2006			
Typed or printed name Robert J. Goodell				Registration No. 41,040		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process)						

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